

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)

09/530472

FILING DATE

APPLICANT(S)

9-8875

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT					
	IND.	DEP.	IND.	DEP.	IND.	DEP.				
1	/		/				51			
2	/		/				52			
3	2		2				53			
4	0		2				54			
5	0		2				55			
6	0		2				56			
7	0		2				57			
8	1		1				58			
9	1		1				59			
10	1						60			
11							61			
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44							94			
45							95			
46							96			
47							97			
48							98			
49							99			
50							100			
TOTAL IND.	2						TOTAL IND.			
TOTAL DEP.	9	1	11	1	1		TOTAL DEP.			
TOTAL CLAIMS	11		12				TOTAL CLAIMS			

PTO-1366 (3-78)

\*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

U.S. DEPARTMENT OF COMMERCE  
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